

**Department of Health Care Finance
 Medical Care Advisory Committee (MCAC)
 State Plan Amendment (SPA) and Rulemaking Report**

December 16, 2021 to April 26, 2022

STATE PLAN AMENDMENTS/WAIVERS

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Adult Substance Abuse Rehabilitative Service (ASARS)/Mental Health Rehabilitation Services (MHRS)	Changes ASARS and MHRS provisions to clarify requirements for utilization management and eligible providers. Adds two new BH services: Behavioral Health Stabilization and Transition Services.	04.26.22			06.01.21 for qualified provider changes; 01.01.22 for other changes	Amends Supplement 6 to 3.1A and Supplement 3 to 3.1B

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		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Emergency SPA: COVID Vaccine Administration Rate Increase (During PHE)	Raises the vaccine administration rates from 80% of the Medicare rate to 100% of the Medicare rate	03.30.22			12.11.20	Amends Section 7.5 (Medicaid Disaster Relief for the COVID-19 National Emergency)
Housing Supportive Services (HSS)	Establishes authority under section 1915(i) of the Social Security Act to reimburse for HSS services for beneficiaries who are or are at risk of homelessness.	03.21.22			05.01.22	Amends the Medicaid State Plan via a 1915(i) SPA
Disaster SPA – Federally Qualified Health Center (FQHC) rebasing	Changes the implementation date of the new FQHC base rate.	03.18.22			01.01.21	Amends Attachment 7.5, pages 15-24
Nonemergency Medical Transportation (NEMT)	Complies with the Consolidated Appropriations Act of 2021 and CMS guidance that effective December 27 th , 2021, all states must assure that all NEMT providers (excluding public transit authorities) and individual drivers meet certain requirements.	03.02.22			12.27.21	Amends Attachment 3.1-A: page 9; Attachment 3.1-B: page 8a; and Attachment 3.1-D: pages 1-2
Disproportionate Share Hospital (DSH) Payment	Establishes a new category of disproportionate share hospitals and implement updated payment standards for the newly created class.	03.01.22			10.1.22	Amends Attachment 4.19 A Part III, pages 29-34

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		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Elderly and Persons with Disabilities (EPD) Waiver	Renews and amends the District's EPD waiver to, among other things, incorporate Dual Eligible Special Needs Plans.	02.07.22			02.07.22	
Adult Day Health Program 1915(i)	Renews the District's Adult Day Health Program and makes amendments for allow for participation with Dual Eligible Special Needs Programs	02.07.22			02.07.22	Amends Attachment 3.1-I, pages 1-41 and Attachment 4.19-B Part 1, pages 29-33
Third Party Liability (TPL)	Complies with TPL assurances required by the Bipartisan Budget Act of 2018, the Medicaid Services Investment and Accountability Act of 2019, and CMS guidance issued on August 27, 2021 that all state assure certain TPL practices.	01.24.22			12.31.21	Amends 4.22 pages
Postpartum Extension	Extends postpartum coverage from 60 days after the end of a pregnancy until 12 months after the end of a pregnancy		04.01.22		04.01.22	
Alternative Benefit Plan (ABP)			03.30.22		01.01.22	

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Coverage of Routine Patient Costs Furnished in Connection with Clinical Trials	Effectuates the coverage of routine patient costs incurred during qualified clinical trials, as required by the Consolidated Appropriations Act, 2021, Division CC, Title II, Section 210.		03.28.22		01.01.22	Adds Attachment 3.1A, page 12; Attachment 3.1B, page 10; and Attachment 4.19B, page 35
Integrated Online Application for Food, Cash, & Medical Benefits	Establishes an alternative, online combined application for food, cash, and medical benefits, which would allow individuals to apply for benefits in the District on a one-stop-shop basis and aligns with the recently approved integrated paper application for food, cash, and medical benefits.		07.14.21		07.26.21	Proposes an alternative online integrated application that aligns with the recently approved integrated paper application.
Supported Employment Services	Creates new 1915(i) State Plan authority for supported employment for adults with SMI and SUD Will waive income eligibility restriction to disregard all income between statutory limit (150% FPL) and District income eligibility levels for Medicaid		06.30.21		07.01.22	Amends the Medicaid State Plan via a 1915(i) SPA

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		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
COVID Vaccine Administration Rate Increase (Permanent Authority)	Raises the vaccine administration rates from 80% of the Medicare rate to 100% of the Medicare rate			X	FY21	Amends Attachment 4.19B
Burial Funds/ Excess Resources Financial Eligibility	Establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	FY21	Amends Supplement 8b to Attachment 2.6A
Unborn Child/ Pregnant Woman Children's Health Insurance Program (CHIP)	Provides CHIP eligibility to unborn children of pregnant women during the prenatal period of undocumented immigrant mothers who are not eligible or enrolled in other health coverage.			X	FY23	Creates a new CHIP State Plan
FY 2023 Physician Supplemental Payment	Continues periodic supplemental payments for Medicaid-enrolled physician groups, with at least five hundred (500) physicians that are members of the group, that contract with a public general hospital located in an economically underserved area of the District to deliver inpatient, emergency department, and intensive care physician services to Medicaid beneficiaries.			X	10.1.22	

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		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Doula Services	Adds doula services and a covered service under the Medicaid State Plan.			X	10.1.22	
DC People with Intellectual and Development Disabilities (IDD) Waiver Renewal	Renews the waiver for an additional five (5) years, modifies the Developmental Disabilities (DD) criteria for waiver enrollment eligibility, updates specific services, adds new services, and sets reimbursement rates for proposed new services			X	10.1.22	
DC Individual and Family Support (IFS) Waiver Amendment	(1) Modifies the Developmental Disabilities (DD) criteria for waiver enrollment eligibility; (2) adds of new services; (3) sets payment rates for new services; (4) adds the option for participant-directed services (PDS); (5) modifies reimbursement methodology to include District-funded payment enhancements; and (6) modifies the waiver enrollment process.			X	10.1.22	

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Appendix K #7	Extends the date to pay out one-time supplemental payments available to eligible waiver providers employing Direct Support Professionals (DSPs) to September 30, 2022; allows payment for a one-time COVID-19 vaccination incentive payment to eligible waiver providers; allows payment for a hiring and retention incentive payment to eligible HCBS waiver providers; allows increased payment rates for RN and LPN services; allows increased per diem reimbursement rates to IDD waiver providers of Supported Living Daily (with or without transportation) and Residential Habilitation; and allows for the provision of participant-directed PCA in excess of 16 hours per day (up to 24 hours), when authorized in the participant's person-centered service plan for participants in the Services My Way program.			X	FY21	

RULES

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – Intellectual and Developmental Disabilities Audit Waiver Rule	Clarifies that ID/DD Waiver providers must use cost report templates designated by DHCF and requires expenditures reported on the cost reports to comply, with the allowable cost principles in the Medicare Principles of Reimbursement.	04.15.22			Amends Chapter 19 of Title 29 DCMR
Final Rule – Medicaid Managed Care/Children & Adolescents Supplemental Security Income Program (CASSIP)	Outlines the new requirements for enrollment in either DC Healthy Families managed care program or an alternative delivery system, and amends outdated enrollment and incorporates updated enrollment and disenrollment procedures and requirements that apply to all Medicaid eligibility groups enrolled in DC Healthy Families managed care program	03.18.22			Amends Chapter 55 and Repeals Chapter 57 of Title 29 DCMR
Final Rule – FY 22 Physician Supplemental Payments	Provides a supplemental payment in FY 22 to eligible physician group(s)	03.18.22			Amends Chapter 9 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – Health Care Safety Net Administration	Amends rules governing the DC Healthcare Alliance rules to conform to funded statutory changes to the Alliance program and streamline the program with Medicaid.	<i>Scheduled for publication in 05.06.22 issue of D.C. Register.</i>			Amends Chapter 33, Subtitle B, Title 22 DCMR
Final Rule – Housing Supportive Services (HSS)	Establishes rules to reimburse for HSS services for beneficiaries who are or are at risk of homelessness.			X	Adds new Chapter 103 to Title 29 DCMR
Final Rule – Program for All-Inclusive Care for the Elderly (PACE)	Establishes standards governing eligibility criteria for participants, covered services, conditions of participation for providers, reimbursement, data collection, reporting requirements, and quality improvement for the District PACE program.			X	Adds new Chapter 88 to Title 29 DCMR
Home and Community-Based Services Waiver for Individuals with Intellectual and Developmental Disabilities Cost Report Audit (Proposed)	Proposes changes to the standards governing cost reporting to clarify that ID/DD Waiver providers must use cost report templates designated by DHCF and to require expenditures reported on the cost reports to comply, unless specified otherwise by DHCF, with the allowable cost principles in the Medicare Principles of Reimbursement	<i>Scheduled for publication in 04.29.22 issue of D.C. Register.</i>			Amends Chapter 19 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Medically Needy Spend Down (Emergency and Second Proposed)	Clarifies the eligibility factors for medically needy individuals whose income exceeds the maximum income for their eligibility category but are otherwise eligible for Medicaid, and details the medically needy spend down process for medically needy individuals to become eligible for Medicaid.	<i>Scheduled for publication in 05.06.22 issue of D.C. Register.</i>			Creates new Sections 9515 and 9516 of chapter 95 of Title 29 DCMR
Other Licensed Providers (Emergency and Proposed)	Permits the District Medicaid program to enroll additional licensed providers (psychologists, licensed independent clinical social workers, licensed professional counselors and licensed marriage and family therapists).	<i>Scheduled for publication in 05.06.22 issue of D.C. Register.</i>			Amends Chapter 9 of Title 29 DCMR
Home and Community-Based Services Waiver for Individual and Family Support (IFS) (Second Emergency and Proposed)	Establishes standards governing eligibility criteria for participants, covered services, conditions of participation for providers, reimbursement, data collection, reporting requirements, and quality improvement for the District IFS Waiver program.	<i>Scheduled for publication in 05.06.22 issue of D.C. Register.</i>			Adds new Chapter 90 to Title 29 DCMR
Postpartum Extension (Emergency and Proposed)	Extends the District Medicaid program's postpartum coverage period from sixty (60) days to twelve (12) months.	<i>Scheduled for publication in 05.06.22 issue of D.C. Register.</i>			Amends Chapters 95 and 100 of Title 29 DCMR

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MAGI-Based Income Methodology Update (Emergency and Proposed)	Updates the Medicaid eligibility rules governing MAGI-based income methodology to comply with federal legislative changes from the Tax Cuts and Jobs Act, the Bipartisan Budget Act of 2018, and the HEALTHY KIDS Act, as outlined in the CMS State Health Official Letter 19-003.		X		Amends section 9506 of Chapter 95 of Title 29 DCMR
Immigrant Children's Program Eligibility Rule (Emergency and Proposed)	Clarifies eligibility level for ICP at levels comparable to Medicaid/CHIP for children (319% FPL for children 0-18 and 216% FPL for children 19-20, with additional 5% income disregard)		X		Amends Chapter 73 of Title 29 DCMR
Dual Eligible Special Needs Plan (D-SNP) Combined Rulemaking	Establishes Dual Eligible Special Needs Programs under the District Dual Choice Program.		X		Adds new Chapter 57 and amends Chapters 97 and 102 of Title 29 DCMR
Services My Way Program	Clarifies requirements that all participant-directed workers enroll as providers with DHCF and include their NPIs on the claims submitted to DHCF for payment.			X	Amends Chapter 101 to Title 29 DCMR

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		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Excess Resources and Burial Funds (Emergency and Proposed)	Clarifies methods for counting resources for individuals subject to a resource test (KB, ABD, individuals applying for/receiving LTCSS); and establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	Amends Chapters 95 and 98 of Title 29 DCMR
Pharmacy Lock-In/ DUR Requirements (Emergency and Proposed)	Makes technical corrections to pharmacy lock-in language to better align with DHCF intent with regard to implementation; align with new requirements passed in SUPPRORT ACT.			X	Amends Chapter 27 of Title 29 DCMR
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) (Third Proposed)	Updates reimbursement standards for DMEPOS; clarifies the settings in which covered DMEPOS may be provided; and adds a face-to-face encounter requirement for Medicaid coverage of DMEPOS.			X	Amends Chapter 9 of Title 29 DCMR
Adult Substance Abuse Rehabilitative service (ASARS)/Mental Health Rehabilitation Services (MHRS) (Emergency and Proposed)	Proposes changes to ASARS and MHRS rulemakings to clarify requirements for utilization management and qualified providers.			X	Amends rules at Chapters 52 and 91 of Title 29 DCMR

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		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Supportive Employment Services	Provides home- and community-based services under Section 1915(i) of the Social Security Act and permits the District Medicaid program to establish therapeutic and vocational support services to enable individuals with either a serious mental illness or SUD to find and sustain employment.			X	Promulgates rules at Chapter 107 of Title 29 DCMR